•								Application or Docket Number					
	PATENT.	RD	RD COCCO										
		Effect	10699866										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE O			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			23					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		* 3			X\$ 9=	27	OR	X\$18=		
INC	EPENDENT C	AIMS	5 minus 3 =		* 2			X43=		OŘ	X86=		
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT	SENT			ı	+145=	•	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II									- [7-7-6	.	OTHER	THAN	
	(Column 1) (Column 2) (Column							SMAL	L ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	5-505	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	-23	>	=		X\$ 9=		ØΒ	X\$18=		
	Independent	. 5	Minus					X43=		OR	-X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1.	OR	+290= /	/	
								TOTA	-	OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									C I		- COII. I EE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH! NUME		PRESENT EXTRA		RATE	ADDI-		RATE	ADDI-	
				PREVIO • PAID F					TIONAL FEE			TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CI AIIA	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	:	OR	+290=		
								TOTA DDIT. FE		OR	TOTAL ADDIT. FEE		
(Column 1): (Column 2) (Column 3)													
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent		Minus	***		=	I	X43=	<u> </u>	OR	X86=		
٦	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR OR	+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT: FEE											ADDIT. FEE		
•	The *Highest Num	ber Previously Paid	For" (Total or	Independe	nt) is the	highest number	r four	nd in the a	ppropriate bo	x in cot	umn 1.		